



# DPH ICD-10 IMPLEMENTATION PROJECT



# ICD-10-CM BEHAVIORAL HEALTH CODING TRAINING WORKBOOK

FOR LOCAL HEALTH DEPARTMENTS AND RURAL HEALTH CLINICS
(WITH ANSWERS)

WBS 2.5 Version 1.0



# **Change History**

Version Number & Date	Version Description	Version Author
V1.0 – September 16, 2014	Final BEHAVIORAL HEALTH workbook to be used for September 2014 Specialized training.	Sarah Brooks

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# 1. ICD-10-CM: The Chapters

Chapter #	Description	Range of Codes
1	Certain infectious and parasitic diseases	A00-B99
2	Neoplasms	C00-D49
3	Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	D50-D89
4	Endocrine, nutritional and metabolic diseases	E00-E89
5	Mental, Behavioral and Neurodevelopmental disorders	F01-F99
6	Diseases of the nervous system	G00-G99
7	Diseases of the eye and adnexa	H00-H59
8	Diseases of the ear and mastoid process	H60-H95
9	Diseases of the circulatory system	I00-I99
10	Diseases of the respiratory system	J00-J99
11	Diseases of the digestive system	K00-K95
12	Diseases of the skin and subcutaneous tissue	L00-L99
13	Diseases of the musculoskeletal system and connective tissue	M00-M99
14	Diseases of the genitourinary system	N00-N99
15	Pregnancy, childbirth and the puerperium	O00-O9A
16	Certain conditions originating in the perinatal period	P00-P96
17	Congenital malformations, deformations and chromosomal abnormalities	Q00-Q99
18	Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	R00-R99
19	Injury, poisoning and certain other consequences of external causes	S00-T88
20	External causes of morbidity	V00-Y99
21	Factors influencing health status and contact with health services	Z00-Z99

# 2. ICD-10-CM: The Chapter Blocks for Behavioral Health

# 2.1 Chapter 5 - Mental, Behavioral and Neurodevelopmental disorders (F01-F99)

<b>F01-F09</b> Mental disorders due to known physiological conditions	F50-F59 Behavioral syndromes associated with physiological disturbances and physical factors
<b>F10-F19</b> Mental and behavioral disorders due to psychoactive substance use	<b>F60-F69</b> Disorders of adult personality and behavior
<b>F20-F29</b> Schizophrenia, schizotypal, delusional, and other non-mood psychotic disorders	F70-F79 Intellectual disabilities
F30-F39 Mood [affective] disorders	<b>F80-F89</b> Pervasive and specific developmental disorder
<b>F40-F48</b> Anxiety, dissociative, stress-related, somatoform and other nonpsychotic mental disorders	<b>F90-F98</b> Behavioral and emotional disorders with onset usually occurring in childhood and adolescence
	<b>F99</b> Unspecified mental disorder

# 2.2 Chapter 21 – Factors influencing health status and contact with health services (Z00-Z99)

<b>Z00-Z13</b> Persons encountering health services for examinations	<b>Z40-Z53</b> Encounters for other specific health car
<b>Z14-Z15</b> Genetic carrier and genetic susceptibility to disease	<b>Z55-Z65</b> Persons with potential health hazards related to socioeconomic and psychosocial circumstances
<b>Z16</b> Resistance to antimicrobial drugs	<b>Z66</b> Do not resuscitate status
<b>Z17</b> Estrogen receptor status	<b>Z67</b> Blood type
<b>Z18</b> Retained foreign body fragments	<b>Z68</b> Body mass index (BMI)
<b>Z20-Z28</b> Persons with potential health hazards related to communicable diseases	<b>Z69-Z76</b> Persons encountering health services in other circumstances
<b>Z30-Z39</b> Persons encountering health services in circumstances related to reproduction	<b>Z77-Z99</b> Persons with potential health hazards related to family and personal history and certain conditions influencing health status

## 2.3 The Basics: Coding Steps

Below is the process to follow when looking up codes. It is essential to use both the Alphabetic Index and Tabular List when locating and assigning a code. The Alphabetic Index does not always provide the full code. Selection of the full code, including laterality and any applicable 7th character can only be done in the Tabular List. Even if a dash is not included at the Alphabetic Index entry, it is necessary to refer to the Tabular List to verify if a 7th character is required.

- A. Locate the main term in the Alphabetic Index
  - a. For Chest Cold, Look up "Cold" then go down list to find "Chest"
- B. Scan the main term entry for any instructional notes
  - a. "see Bronchitis" so look up "Bronchitis"
- C. In the diagnosis being coded, identify any terms that modify the main term
  - a. Nothing under "Bronchitis J40" relates back to Chest Cold
- D. Follow any cross-reference notes
- E. Always verify the code in the Tabular List
  - a. <u>Never</u> begin code searches using Tabular List may lead to coding errors
  - b. Go to J40 in the Tabular
- F. Follow any instructional notes
  - a. Do any of the instructions apply to Chest Cold?
- G. Select the code
  - a. J40 is the correct code

# 3. BEHAVIORAL HEALTH – Chapters 21, 5

## 3.1 Behavioral Health: Review Questions

1.	Z codes are procedure codes.
	True False
2.	A status code is distinct from a history code.
	True False
3.	If a client with a history of alcohol dependence completes a questionnaire during an encounter and states he has had nothing to drink for the past 6 months, the clinician could code this as history of alcohol dependence.  True  False
4.	If a client recently lost their spouse and states they are depressed, clinicians should code this as F32.9, Major depressive disorder, single episode, unspecified.
	True False
5.	Codes in category, Behavioral and emotional disorders with onset usually occurring in childhood and adolescence (F90-F98) can be assigned to adults.  True False

# 3.2 Maternal Health: Coding Exercises

#	Scenario/Diagnosis	Answer
1	19 year old male seen for continued counseling for treatment of dependence on amphetamines.	
2	30 year old male with dependence on chewing tobacco presents to the clinic requesting assistance for cessation of chewing tobacco. He has been a chronic user of chewing tobacco since age 13 and now he wants to quit. Counseling on the options for chewing tobacco cessation was provided to the client.	
3	45 year old male is seen for individual psychotherapy as part of his long-term treatment for cluster B personality disorder. The client has been taking his monoamine oxidase inhibitor (MAOI) medication and reports he feels it has helped him manage his impulsive, overly emotional, and erratic behavior. The client has a history of alcohol dependence which is in remission.	
4	27 year old female is referred by the Maternal Health clinic for evaluation for postpartum depression. She has a newborn and two other children under age 5 and is feeling overwhelmed. It is determined she has postpartum dysphoria. She is referred for childcare counseling.	
5	43 year old female reports having episodes of increased forgetfulness including problems remembering recent events, the names of people and things, wandering off forgetting where she is going or how to return home. She is diagnosed with dementia due to early-onset Alzheimer's .	

# 3.3 Chapter 15 – Coding Dementia due to earlyonset Alzheimer's Disease

What is the correct code for Dementia due to early-onset Alzheimer's Disease?

ICD-9-CM	ICD-10-CM/PCS				
Code(s) Assigned					
<b>331.0</b> Alzheimer's disease <b>294.10</b> Dementia in conditions classified elsewhere without behavioral disturbance	<b>G30.0</b> Alzheimer's disease with early onset <b>F02.80</b> Dementia in other diseases classified elsewhere, without behavioral disturbance				
Index	red Terms				
Dementia due to or associated with condition(s) classified elsewhere Alzheimer's Without behavioral disturbance 331.0 [294.10]	Dementia In (due to) Alzheimer's diseasesee Disease, Alzheimer's Disease, diseasedsee also Syndrome Alzheimer's Early onset G30.0 [F02.80]				

#### Code Comparisons

- One code category: 331
- Index does not reference early-onset Alzheimer's disease
- Use additional code, where applicable, to identify dementia with or without behavioral disturbance (instructional note)
- Code first any underlying physical condition (sequence instruction)
- Category code G30
- G30 is further specified as early onset G30.0
- Index does reference early-onset Alzheimer's disease
- Use additional code, where applicable to identify dementia with or without behavioral disturbance (instructional note)
- Code first the underlying physiological condition (sequence instruction)

#### Documentation Needed From Physicians

- Document dementia due to Alzheimer's disease
- In reporting code 294.10, the documentation should not address behavior disturbances such as wandering off or physical violence (behavior that puts the patient or others at risk)
- Indicate early onset Alzheimer's disease...do not assign a code based on age alone
- Document Alzheimer's with related dementia
- In reporting code F02.80, the documentation should not address behavior disturbances such as wandering off or physical violence (behavior that puts the patient or others at risk)

# 3.5 Coding Tobacco Use and Nicotine Dependence (ICD-9-CM vs ICD-10-CM)

What is the correct code for tobacco use and nicotine dependence in a cigarette smoker?

ICD-9-CM	ICD-10-CM		
Code(s	S) Assigned		
<b>305.1</b> Tobacco use disorder	F17.210 Nicotine dependence, cigarettes, uncomplicated		
Index	ed Terms		
Index: Dependence nicotine 305.1	Index:  Dependence (on) (syndrome)  -drug NEC nicotine cigarettes F17.210		
Code C	omparisons		
<ul> <li>Tobacco abuse, tobacco dependence, and nicotine dependence are all classified to the same code, 305.1 Tobacco use disorder</li> <li>Code assignment is not impacted by the type of tobacco product used</li> <li>Code assignment would be different if the patient is pregnant</li> <li>Code assignment would be different if the patient has a past history of tobacco use instead of a current tobacco use disorder</li> </ul>	<ul> <li>ICD-10-CM Official Guidelines for Coding and Reporting provides guidance when documentation of substance use, abuse, and dependence appears in the same health record</li> <li>Tobacco use is coded Z72.0 but it would not be reported along with a code from F17 for the nicotine/tobacco dependence per official coding guidelines and Excludes1 note with Z72.0 and F17</li> <li>Subcategories under F17 identify specific tobacco products and nicotine-induced disorders</li> <li>Code assignment would be different if the patient is pregnant</li> <li>Code assignment would be different if the patient has a past history of tobacco dependence instead of a current dependence on tobacco</li> <li>There is no code for past history of tobacco use, only a code for past history of tobacco dependence</li> <li>Tobacco dependence in remission is coded differently than past history of tobacco dependence</li> </ul>		
Documentation Ne	eeded From Physicians		
<ul> <li>The provider needs to document that the patient smokes tobacco or uses tobacco</li> <li>Coding Clinic articles provide advice to report 305.1 for a patient who is a smoker (CC 4Q 2009, CC 1Q 2009, CC 2Q 1996, and CC 4Q 1994, and CC Nov-Dec 1984)1</li> </ul>	<ul> <li>The provider needs to specify if the patient is engaging in the use of tobacco or has developed a dependence on tobacco/nicotine</li> <li>Documentation is needed on the type of tobacco product used and whether or not there are nicotine-induced disorders such as remission or withdrawal</li> </ul>		

# 4. Training Evaluation

#### Division of Public Health ICD-10-CM Training Evaluation

1. Please select the category tha	t best desc	ribes your profession	on:		
☐ Physician	☐ Physic	ian Assistant/FNP		Nurse	☐ Other Clinician
☐ Billing/Accounting	☐ Health	Info Management		Administrat	ion 🗆 IT
☐ Scheduling/Registrat	tion [	Consultant		Business/Fi	nancial
☐ DPH Representative		ORHCC Represe	ntative	☐ Oth	er
2. Name of course being evalua	ited:				
☐ Basic ICD-10-CM Codin	ng				
☐ Specialized ICD-10-CM	Coding Tr	raining – Behaviora	al Healt	h	
☐ Specialized ICD-10-CM	Coding Tr	raining – Child Hea	ılth, He	alth Check	
☐ Specialized ICD-10-CM	Coding Tr	aining – Family Pla	nning		
☐ Specialized ICD-10-CM	Coding Tr	raining – Maternal	Health		
☐ Specialized ICD-10-CM BCCCP	Coding T	raining – Primary C	Care, W	omen's Hea	alth, Chronic Disease,
☐ Specialized ICD-10-CM	Coding T	AIH ATS _ Suning _	/ Com	municable F	disease
□ Specialized ICD-10-Civi	Coung 11	anning – 51D, 111 v	, Com	numeable L	risease
3. Venue Type: □Face-to-face Comments related to ve	•	□via Webinar	by mys	eelf □via	Webinar with others
4. Will the training help you ful  ☐ Yes ☐ No Commo	•	b responsibilities?			
5. Did the combination of lectur  ☐ Yes ☐ No Commo		exercises and quizz	es aid ii	n the learnin	ng process?

б. Any recomme	endations on how to	o improve the trai	ning?		
☐ Yes	☐ No Comments	; -			
7. Overall, how	would you rate the	_			<b>.</b>
	Great	Good	Average	Fair	Poor
Instructor Knowledge					
Content					
Presentation					
			1		
8. Other Comm	ents				

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